

# NON-RESIDENT RAPTOR CAPTURE LICENSE APPLICATION FOR THE YEAR 2014

FEE - \$242.00

No person shall receive more than two (2) general raptor capture licenses **OR** one (1) general raptor capture license and one (1) limited quota raptor capture license in any calendar year. No person shall receive more than one (1) limited quota raptor capture license in any calendar year.

Applications for general raptor capture licenses for all raptor species will be accepted January 1 through December 31 for all the calendar year in which the license is valid. Separate applications and fees should be submitted for each raptor applied for. Applications for limited quota raptor capture license for peregrine falcons shall be submitted not later than March 1 during the calendar year in which the licensee intends to take a peregrine falcon. All applications must be submitted to the License Sales and Accounting Section as indicated below.

The Department on a drawing basis may issue a maximum of five (5) limited quota raptor capture licenses to capture peregrine falcons annually. In the drawing, four (4) licenses shall be reserved for residents and one (1) license shall be reserved for non-residents.

Applicant applying for:

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**GENERAL RAPTOR CAPTURE LICENSE:** Accipitriformes, Falconiformes (except Peregrine falcon), Stringiformes as listed in 50 CFR 10.13.  
Application period: January 1 – December 31.

**GENERAL RAPTOR CAPTURE LICENSE:** Golden eagles shall only be taken in accordance with Commission Regulation, Chapter 25, Falconry Regulation, Section 8.

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**LIMITED QUOTA CAPTURE FALCON LICENSE:** (Peregrine Falcon)  
Application period: January 1 – March 1.

FALCONRY PERMIT NUMBER:

\_\_\_\_\_ USFWS Issued Permit Permit #: \_\_\_\_\_

\_\_\_\_\_ State Issued Permit Permit #: \_\_\_\_\_ State Issued: \_\_\_\_\_

\_\_\_\_\_  
LAST NAME FIRST NAME and Middle Initial DATE OF BIRTH (Month/Day/Year)

\_\_\_\_\_  
SOCIAL SECURITY NUMBER (Required) Hair Color Eye Color Gender Weight Height (Feet/Inches)

\_\_\_\_\_  
MAILING ADDRESS CITY STATE ZIP CODE

\_\_\_\_\_  
PHYSICAL ADDRESS CITY STATE ZIP CODE

\_\_\_\_\_  
SPORTSPERSON I. D.

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

A COPY OF YOUR PERMIT TO PRACTICE FALCONRY FROM A STATE MEETING FEDERAL FALCONRY REQUIREMENTS **MUST** ACCOMPANY THIS APPLICATION.

NOTE: ONLY CERTIFIED CHECK, CASHIER'S CHECK OR MONEY ORDER WILL BE ACCEPTED.  
**NO PERSONAL CHECKS WILL BE ACCEPTED.**

NOTE: Please mail completed application, copy of your falconry permit and proper fee to:

WYOMING GAME AND FISH DEPARTMENT  
LICENSE SALES AND ACCOUNTING SECTION  
5400 BISHOP BOULEVARD  
CHEYENNE, WY 82006-0001